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PTO/SB/01 (10-00)

Approved for use through 10/31/2002 OMB 0651-0032
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	5000.137
First Named Inventor	Edmond
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GROUP III NITRIDE LED WITH UNDOPED CLAD LAYER

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

ApplicationNumber(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
or Bar Code Label 021176 OR Correspondence address below

Name	Philip Summa, P.A.		
Address	13777 Ballantyne Corporate Place		
Address	Suite 315		
City Charlotte	State NC	ZIP 28277	
Country <i>John Adam</i>	Telephone 704-945-6700	Fax 704-945-6735	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <i>John Adam</i>	Family Name EDMOND or Surname		
Inventor's Signature <i>John Adam</i>			Date 1/12/01
Residence: City Cary	State NC	Country US	Citizenship US
Mailing Address 206 W. Jules Verne Way			
Mailing Address			
City Cary	State NC	ZIP 27511	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <i>Kathleen Marie</i>	Family Name DOVERSPIKE or Surname		
Inventor's Signature <i>Kathleen Marie Doverspike</i>			Date 1/12/01
Residence: City Apex	State NC	Country US	Citizenship US
Mailing Address 104 Cupola Chase Way			
Mailing Address			
City Apex	State NC	ZIP 27502	Country US
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

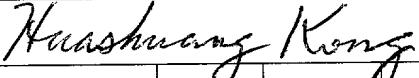
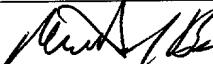
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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Hua-shuang		KONG							
Inventor's Signature							Date	1/15/01	
Residence: City	Raleigh	State	NC	Country	US	Citizenship	US		
Post Office Address	10840 Bexhill Drive								
Post Office Address									
City	Raleigh	State	NC	ZIP	27606	Country	US		
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])				Family Name or Surname					
Michael John		BERGMANN							
Inventor's Signature							Date	1/15/01	
Residence: City	Durham	State	NC	Country	US	Citizenship	US		
Post Office Address	2527 Sevier Street								
Post Office Address									
City	Durham	State	NC	Zip	27705	Country	US		
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature							Date		
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country			

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